

IV / Central Line Access - Hemodynamics Monitoring

IV / Central Line Access

Initiate and maintain IV

- | | |
|---|--|
| <input type="checkbox"/> Ensure / Initiate and maintain IV access | Routine, Once
As needed immediately insert 2 large bore (at least 20 gauge) peripheral IV lines or call attending MD for STAT central line, intraosseus (IO) or other access. |
| <input type="checkbox"/> sodium chloride 0.9 % flush | 10 mL, intravenous, every 12 hours scheduled |
| <input type="checkbox"/> sodium chloride 0.9 % flush | 10 mL, intravenous, PRN, line care |

Hemodynamic Monitoring

If patient has IJ or Subclavian Central Venous Line

- | | |
|---|---|
| <input type="checkbox"/> Hemodynamic Monitoring - CVP | Routine, Every hour For 999 Occurrences
Measure: CVP |
|---|---|

Nursing

Nursing - HMM, HMSL and HMB

- | | |
|---|--|
| <input checked="" type="checkbox"/> Vital signs - T/P/R/BP | Routine, Every hour For 3 Hours
Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment. |
| <input checked="" type="checkbox"/> Pulse oximetry | Routine, Daily
Current FIO2 or Room Air:
Place SpO2 monitor (near infrared spectroscopy) |
| <input checked="" type="checkbox"/> Daily weights | Routine, Daily
Notify provider if weight is over 5 pounds from initial dry weight |
| <input checked="" type="checkbox"/> Activity: Bed rest initially then progress as tolerated | Routine, Until discontinued, Starting S
Specify: Other activity (specify)
Other: Bed rest initially then progress activity as tolerated |
| <input checked="" type="checkbox"/> Patient education | Routine, Prior to discharge
Patient/Family:
Education for: Other (specify)
Specify: Sepsis Education |

Notify

- | | |
|---|---|
| <input type="checkbox"/> Notify Provider/Sepsis Team: | Routine, Until discontinued, Starting S, -for MAP LESS than 65 or GREATER than 80

-for heart rate LESS than 60 or GREATER than 120

-for urine output LESS than 30 mL/hour

-immediately for any acute changes in patient condition (mental status, vital signs) |
|---|---|

Initial Management of Suspected Sepsis

Blood Cultures

- | | |
|--|---|
| <input type="checkbox"/> Blood culture x 2 | "And" Linked Panel |
| <input type="checkbox"/> Blood Culture (Aerobic & Anaerobic) | Once, Blood
Collect STAT before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, one set may be drawn from a central line; an IV line should NEVER be used. |

Blood Culture (Aerobic & Anaerobic) Once, Blood
Collect STAT before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, one set may be drawn from a central line; an IV line should NEVER be used.

Lactic Acid - STAT and repeat 2 times every 3 hours

Lactic acid level, SEPSIS - Now and repeat 2x every 3 hours Now and repeat 2x every 3 hours For 3 Occurrences
STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.

Crystalloids for Fluid Resuscitation for hypotension, lactic acid greater than 2.0, or any one sign or symptom of acute organ dysfunction) (Single Response)

The target fluid bolus volume can be calculated using the ideal weight as long as the provider indicates that the patient is obese. If the provider does not indicate obesity, the actual weight will be used to calculate the target volume.

Is your patient obese? (BMI GREATER than 30)

Yes (Single Response) (Selection Required)

Given your response of "Yes", you have the option to dose IV fluids using Ideal Body Weight (IBW).

Calculate dose using Ideal Body Weight (IBW) (Single Response)

lactated ringers IV bolus and infusion + Vital Signs - For Obese Patients (Single Response)

lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours - For Obese Patients **"And" Linked Panel**

lactated ringers bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.
Provider Response: YES, I choose to use the Ideal Body Weight (IBW), BMI GREATER than 30

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

lactated ringers IV infusion - For Obese Patients **"And" Linked Panel**

lactated ringer's infusion 126 mL/hr, intravenous, continuous
Reassess patient after 1 L of IV fluid given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.
Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

sodium chloride 0.9% bolus + Vital Signs OR infusion - For Obese Patients (Single Response)

sodium chloride 0.9% bolus + Vitals Every 15 Minutes x 4 Hours - For Obese Patients **"And" Linked Panel**

sodium chloride 0.9 % bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.
Provider Response: YES, I choose to use the Ideal Body Weight (IBW), BMI GREATER than 30

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

<input type="checkbox"/> sodium chloride 0.9% infusion - For Obese Patients	"And" Linked Panel
<input type="checkbox"/> sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids. Doses start immediately. Notify provider immediately upon completion of administration of 1 L of fluid.
<input type="checkbox"/> Do NOT calculate dose using Ideal Body Weight (IBW) (Single Response)	
<input type="checkbox"/> lactated ringers IV bolus + Vital Signs OR infusion (Single Response)	
<input type="checkbox"/> lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours	"And" Linked Panel
<input type="checkbox"/> lactated ringers bolus	30 mL/kg, intravenous, once, For 1 Doses Reassess patient after IV fluid bolus given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of fluid bolus administration.
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<input type="checkbox"/> Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)	
<input type="checkbox"/> Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time	Routine, Once

() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)

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() No (Single Response)

() lactated ringers IV bolus + Vital Signs OR infusion (Single Response)

() lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours **"And" Linked Panel**

lactated ringers bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
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Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

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sodium chloride 0.9 % bolus 30 mL/kg, intravenous, once, For 1 Doses
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Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)

() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time Routine, Once

Antibiotics (Selection Required)

Please Select the appropriate indication(s) for antibiotic use below:

Chorioamnionitis (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

ampicillin 2 g IV + gentamicin 5 mg/kg IV

"And" Linked Panel

ampicillin IV

2 g, intravenous, for 30 Minutes, every 6 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Other

Specify: Chorioamnionitis

gentamicin (GARAMYCIN) IV

5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Other

Specify: Chorioamnionitis

ampicillin 2 g IV + gentamicin 5 mg/kg IV + clindamycin
(CLEOCIN) 900 mg IV

"And" Linked Panel

ampicillin IV

2 g, intravenous, for 30 Minutes, every 6 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Other

Specify: Chorioamnionitis

gentamicin (GARAMYCIN) IV

5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Other

Specify: Chorioamnionitis

<input type="checkbox"/> clindamycin (CLEOCIN) IV	<p>900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis</p>
<hr/>	
<input type="checkbox"/> gentamicin IV + piperacillin-tazobactam (ZOSYN) IV (Single Response)	<p style="text-align: center;">"And" Linked Panel</p>
<input type="checkbox"/> gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 3.375 g IV - NOT HMW <input type="checkbox"/> gentamicin (GARAMYCIN) IVPB	<p>5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	<p>3.375 g, intravenous, every 6 hours First dose STAT - within an hour - after blood and other cultures obtained.</p> <p>Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 3.375 g IV - HMW Only	

[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis
[] piperacillin-tazobactam (ZOSYN) 3.375 g IV	"Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis,Other Specify: Chorioamnionitis
[] piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis,Other Specify: Chorioamnionitis
() If Pseudomonas Suspected - gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 4.5 g IV - NOT HMW	"And" Linked Panel
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis,Other Specify: Chorioamnionitis

[] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, every 6 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis
() If Pseudomonas Suspected - gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 4.5 g IV - HMW Only	
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
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[] piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only) "Followed by" Linked Panel	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+6 Hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV **"And" Linked Panel**

gentamicin (GARAMYCIN) IV 5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Other
Specify: Chorioamnionitis

clindamycin (CLEOCIN) IV 900 mg, intravenous, for 30 Minutes, every 8 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart
Reason for Therapy: Bacterial Infection Suspected
Indication: Other
Specify: Chorioamnionitis

Yes (Single Response)

aztreonam (AZACTAM) 2 g IV + gentamicin 5 mg/kg IV **"And" Linked Panel**

aztreonam (AZACTAM) IV 2 g, intravenous, every 6 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis,Other
Specify: Chorioamnionitis

gentamicin (GARAMYCIN) IV 5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

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Reason for Therapy: Bacterial Infection Suspected
Indication: Other
Specify: Chorioamnionitis

aztreonam (AZACTAM) 2 g IV + gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV **"And" Linked Panel**

[] aztreonam (AZACTAM) IV	2 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis`</p>
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[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
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() aztreonam (AZACTAM) 2 g intraMUSCULAR + gentamicin 5 mg/kg IV	"And" Linked Panel
[] aztreonam (AZACTAM) IM	2 g, intramuscular, every 6 hours Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>

gentamicin (GARAMYCIN) IV 5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Other
Specify: Chorioamnionitis

aztreonam (AZACTAM) 2 g intraMUSCULAR + **"And" Linked Panel**
gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg
IV

aztreonam (AZACTAM) IM 2 g, intramuscular, every 6 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
IM Route Selection: I have opted to select the IM route because IV access could not be established

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Indication: Other
Specify: Chorioamnionitis

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Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Community-Acquired Pneumonia (Single Response)
Does your patient have a SEVERE penicillin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) 1 g IV + azithromycin **"And" Linked Panel**
(ZITHROMAX) 500 mg IV

<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	<p>1 g, intravenous, for 30 Minutes, every 24 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR + azithromycin (ZITHROMAX) 500 mg IV	<p align="center">"And" Linked Panel</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IM	<p>1 g, intramuscular, every 24 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Indication: Sepsis</p>
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + azithromycin (ZITHROMAX) 500 mg IV	<p align="center">"And" Linked Panel</p>
<input type="checkbox"/> aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>

azithromycin (ZITHROMAX) IV

500 mg, intravenous, for 60 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Indication: Sepsis

aztreonam (AZACTAM) 2 g intraMUSCULAR +
azithromycin (ZITHROMAX) 500 mg IV

"And" Linked Panel

aztreonam (AZACTAM) IM

2 g, intramuscular, every 6 hours

Intramuscular route selected because no IV access available.

Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

IM Route Selection: I have opted to select the IM route because IV access could not be established

azithromycin (ZITHROMAX) IV

500 mg, intravenous, for 60 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Indication: Sepsis

IM Route Selection: I have opted to select the IM route because IV access could not be established

Nosocomial Pneumonia OR Community-Acquired
Pneumonia with Multi Drug-Resistant Risk (Single
Response)

(e.g. Nursing home resident, IV antibiotic exposure or hospitalization within previous 90 days, chronic dialysis, immunosuppressed, on home infusion therapy or home wound care)

Combined use of piperacillin/tazobactam and vancomycin may be associated with an increased incidence of acute kidney injury.

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

Use meropenem (MERREM) if history of infection with ESBL-producing organism or recent prolonged treatment with piperacillin/tazobactam or cefepime.

ceFEPime 2 g IV + vancomycin 15 mg/kg IV

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi Drug Resistant Classification: Narrow Spectrum Antibiotic</p>
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p>
[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>

[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
[] cefepime (MAXIPIME) IM	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>() piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV (NOT HMW)</p>	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
<p>[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)</p>	
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis</p>	
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk</p>
<p>[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV</p>	
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	

[] metronIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>() piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV (HMW Only)</p>	
[] piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only)	"Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+6 Hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
[] gentamicin (GARAMYCIN) IVPB	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
() meropenem (MERREM) 500 mg IV + vancomycin 15 mg/kg IV	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] meropenem (MERREM) IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
[] gentamicin (GARAMYCIN) IVPB	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
[] meropenem (MERREM) 500 mg intraMUSCULAR + vancomycin 15 mg/kg IV	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] meropenem (MERREM) IM	500 mg, intramuscular, every 6 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
[] vancomycin (VANCOCIN)	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk

Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV

gentamicin (GARAMYCIN) IVPB

5 mg/kg, intravenous, for 30 Minutes, every 24 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

metroNIDAZOLE (FLAGYL) IV

500 mg, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Yes (Single Response)

(i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)

aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV

aztreonam (AZACTAM) IV

2 g, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

vancomycin (VANCOCIN)

15 mg/kg, intravenous, every 12 hours
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S
Reason for Therapy: Bacterial Infection Suspected
Duration of Therapy (Days):
Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV

[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
[] aztreonam (AZACTAM) IM	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	
[] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

metronIDAZOLE (FLAGYL) IV

500 mg, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Urinary Tract Infection (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) IV

"Followed by" Linked Panel

cefTRIAxone (ROCEPHIN) IV

2 g, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

cefTRIAxone (ROCEPHIN) IV

1 g, intravenous, for 30 Minutes, every 24 hours, Starting H+24 Hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

cefTRIAxone (ROCEPHIN)
intraMUSCULAR

1 g, intramuscular, every 24 hours
Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
IM Route Selection: I have opted to select the IM route because IV access could not be established

ceFEPime (MAXIPIME) IV

2 g, intravenous, every 8 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

<input type="checkbox"/> ceFEPime (MAXIPIME) intraMUSCULAR	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> meropenem (MERREM) IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> meropenem (MERREM) intraMUSCULAR	500 mg, intramuscular, every 6 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	"Followed by" Linked Panel
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 hours, Starting H+24 Hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() cefTRIAxone (ROCEPHIN) intramuscular	1 g, intramuscular, every 24 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime (MAXIPIME) intramuscular	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
() piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only) "Followed by" Linked Panel	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> meropenem (MERREM) IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> meropenem (MERREM) intraMUSCULAR	500 mg, intramuscular, every 6 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV or intraMUSCULAR (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IVPB	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> aztreonam (AZACTAM) 2g intraMUSCULAR	2 g, intramuscular, every 8 hours Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> Skin and Soft Tissue Infection - Uncomplicated Cellulitis (Single Response)	
<input type="checkbox"/> vancomycin (VANCOCIN) 15 mg/kg IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Uncomplicated Cellulitis</p>
[] Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot) (Single Response)	
Does your patient have a SEVERE penicillin allergy?	
() No (Single Response)	
() piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - NOT HMW	
[] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)</p>

<input type="checkbox"/> Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - HMW Only	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	"Followed by" Linked Panel
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)

<input type="checkbox"/> Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW Only	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW Only	
<input type="checkbox"/> piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only) "Followed by" Linked Panel	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+6 Hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)
[] Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - NOT HMW	
[] If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - NOT HMW	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)

<input type="checkbox"/> Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
() Yes (Single Response)	
() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOGIN) IV	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)
<input type="checkbox"/> clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	

[] aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN) IV	<p>15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)</p>
[] metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, every 6 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S</p> <p>Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)</p>
[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + metronIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot)
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 6 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> Sepsis of Unknown Source or IV Catheter-Related Infection (Single Response)	
Does your patient have a SEVERE penicillin allergy?	
<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> ceFEPime 2 g IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	

<input type="checkbox"/> cefepime (MAXIPIME) IM <input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - HMW Only	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	"Followed by" Linked Panel
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Indication: Sepsis
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - NOT HMW	
[] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - NOT HMW	

[] piperacillin-tazobactam (ZOSYN) IV	<p>4.5 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection</p>
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW Only	
[] piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only)	"Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	<p>4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation:	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
<input type="checkbox"/> Yes (Single Response) (i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

vancomycin (VANCOCIN)

15 mg/kg, intravenous, every 12 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S

Reason for Therapy:

Duration of Therapy (Days):

Indication: Sepsis of Unknown Source or IV Catheter-Related Infection

aztreonam (AZACTAM) 2 g intraMUSCULAR +
vancomycin 15 mg/kg IV

aztreonam (AZACTAM) IM

2 g, intramuscular, every 8 hours

Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

IM Route Selection: I have opted to select the IM route because IV access could not be established

vancomycin (VANCOCIN) IV + Pharmacy Consult to
Dose (Selection Required)

vancomycin (VANCOCIN)

15 mg/kg, intravenous, every 12 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S

Reason for Therapy:

Duration of Therapy (Days):

Indication: Sepsis of Unknown Source or IV Catheter-Related Infection

Intra-Abdominal Infections (Single Response)

Use meropenem if history of infection with ESBL-producing organism or recent prolonged treatment with zosyn or cefepime. Sources: Complicated Intra-abdominal Infection Guidelines. Clinical Infectious Diseases 2010; 50:133-64. ANTIBIOTIC SUSCEPTIBILITY OF COMMON ORGANISMS - 2016. Houston Methodist Hospital/Department of Laboratory Medicine/Microbiology Section

Does your patient have a SEVERE penicillin allergy?

No

ceFEPime IV + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR meropenem (MERREM) IV - NOT HMW (Single Response) (Selection Required)

ceFEPime (MAXIPIME) 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV (Selection Required)

"And" Linked Panel

ceFEPime (MAXIPIME) IV

2 g, intravenous, every 8 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

metroNIDAZOLE (FLAGYL) IV

500 mg, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

ceFEPime (MAXIPIME) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV (Selection Required)

"And" Linked Panel

ceFEPime (MAXIPIME) IM

2 g, intramuscular, every 8 hours
Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

IM Route Selection: I have opted to select the IM route because IV access could not be established

metroNIDAZOLE (FLAGYL) IV

500 mg, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	3.375 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> meropenem (MERREM) 500 mg IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
<input type="checkbox"/> meropenem (MERREM) IV	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR	500 mg, intramuscular, every 6 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> ceFEPime IV + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR meropenem (MERREM) IV - HMW Only (Single Response) (Selection Required)	"And" Linked Panel
<input type="checkbox"/> ceFEPime (MAXIPIME) 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV (Selection Required)	

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime (MAXIPIME) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV (Selection Required)	"And" Linked Panel
[] ceFEPime (MAXIPIME) IM	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() piperacillin-tazobactam (ZOSYN) 3.375 g IV	"Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	"Followed by" Linked Panel
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> meropenem (MERREM) 500 mg IV	500 mg, intravenous, every 6 hours
<input type="checkbox"/> meropenem (MERREM) IV	Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR	

[] meropenem (MERREM) IM	<p>0.5 g, intramuscular, every 6 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] IF health-care associated, ADD - vancomycin (VANCOCIN) IV (Selection Required)	<p>[] vancomycin (VANCOCIN) 15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Intra-abdominal infections</p>
[] IF high risk or severe, consider antifungal coverage - fluconazole (DIFLUCAN) 400 mg IV	<p>[] fluconazole (DIFLUCAN) IV 400 mg, intravenous, for 60 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied: Reason for Therapy:</p>
() Yes (Single Response)	() aztreonam (AZACTAM) 2 g IV + metronIDAZOLE (FLAGYL) 500 mg IV

[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] OPTIONAL - vancomycin 15 mg/kg IV (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Intra-abdominal infections
() aztreonam (AZACTAM) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) IM	2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established

metroNIDAZOLE (FLAGYL) IV 500 mg, intravenous, every 8 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Type of Therapy: New Anti-Infective Order
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

OPTIONAL - vancomycin 15 mg/kg IV (Selection Required)

vancomycin (VANCOCIN) 15 mg/kg, intravenous, every 12 hours
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin STAT, Until discontinued, Starting S
Reason for Therapy:
Duration of Therapy (Days):
Indication: Intra-abdominal infections

Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT (Single Response)
Does your patient have a SEVERE penicillin allergy?

No (Single Response)

Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to *S. pneumoniae*

cefTRIAxone (ROCEPHIN) 2 g IV + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old

cefTRIAxone (ROCEPHIN) IV 2 g, intravenous, for 30 Minutes, every 12 hours
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

[] vancomycin (VANCOCIN) IV	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() cefTRIAxone (ROCEPHIN) 2 g IV + vancomycin 15 mg/kg IV + ampicillin 2 g IV - For Patients GREATER than 50 years old	
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, every 12 hours Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
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[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT</p>

[] ampicillin IV	<p>2 g, intravenous, for 30 Minutes, every 4 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
<p>() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old</p>	
[] cefTRIAxone (ROCEPHIN) IM	<p>2 g, intramuscular, every 12 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<p>[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)</p>	
[] vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Indication: Sepsis</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
<p>() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 years old</p>	
[] cefTRIAxone (ROCEPHIN) IM	<p>2 g, intramuscular, every 12 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<p>[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)</p>	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S</p> <p>Reason for Therapy: Duration of Therapy (Days): Indication: Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT</p>
[] ampicillin IM	<p>2 g, intramuscular, every 4 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
<p>() Yes (Single Response) Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae</p>	
<p>() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV</p>	
[] aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 12 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<p>[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)</p>	
[] vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 12 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
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<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.

Additional Management of Sepsis

Colloid / Albumin (for patients not responding to initial fluid resuscitation with crystalloids)

<input type="checkbox"/> albumin human 5 % infusion	25 g, intravenous, once, For 1 Doses Administer 500 mL intravenous once for patients not responding to initial fluid resuscitation with crystalloids. Indication:
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Vasopressor Therapy (if unresponsive to initial fluid bolus) (Single Response)

** if unresponsive to initial fluid bolus **

() norEPInephrine (LEVOPHED) infusion	4-30 mcg/min, intravenous, titrated Initiate norepinephrine infusion at 4 mcg/min. Titrate to keep MAP between 65 mmHg to 70 mmHg }. Titrate by 2 mcg/minute every 5 minutes. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 30 mcg/min.
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<input type="checkbox"/> EPINEPHrine (ADRENALIN) infusion	2-30 mcg/min, intravenous, titrated Titrate by 2 micrograms per minute every 5 minutes for mean arterial pressure 65-70 mmHg. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 30 mcg/min.
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Inotropic Therapy

<input type="checkbox"/> DOButamine (DOBUTREX) infusion	0.5-20 mcg/kg/min, intravenous, titrated Titrate by 2 mcg/kg/min every 10 minutes for mean arterial pressure 65-70 mmHg. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 10 mcg/kg/min.
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Steroids

Per 2012 guidelines, steroid therapy is only recommended in the case of hypotension which is refractory to both fluids and vasopressor therapy. Stress dose steroids should also be considered for patients with a history of recent and/or chronic steroid use

<input type="checkbox"/> hydrocortisone sodium succinate (Solu-CORTEF) injection	50 mg, intravenous, every 6 hours For patients with shock refractory to fluids and vasopressors.
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Labs

Laboratory - STAT

<input type="checkbox"/> Arterial blood gas	STAT For 1 Occurrences
<input type="checkbox"/> Venous blood gas	STAT For 1 Occurrences
<input type="checkbox"/> Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Prothrombin time with INR	STAT For 1 Occurrences
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/> Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> CBC with differential	STAT For 1 Occurrences
<input type="checkbox"/> B natriuretic peptide	STAT For 1 Occurrences
<input type="checkbox"/> Troponin T	STAT For 1 Occurrences
<input type="checkbox"/> Fibrinogen	STAT For 1 Occurrences
<input type="checkbox"/> Hepatic function panel	STAT For 1 Occurrences
<input type="checkbox"/> Ionized calcium	STAT For 1 Occurrences
<input type="checkbox"/> Lactic acid level	STAT For 1 Occurrences
<input type="checkbox"/> Magnesium	STAT For 1 Occurrences
<input type="checkbox"/> Phosphorus	STAT For 1 Occurrences
<input type="checkbox"/> Type and screen	STAT For 1 Occurrences

Laboratory - Repeat

<input type="checkbox"/> Basic metabolic panel	Every 6 hours, Starting S For 2 Occurrences
<input type="checkbox"/> Blood gas, venous	Every 6 hours, Starting S For 2 Occurrences
<input type="checkbox"/> CBC with differential	Every 6 hours, Starting S For 2 Occurrences

Laboratory - Additional Microbiology Screens

<input type="checkbox"/> Aerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Anaerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
<input type="checkbox"/> Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
<input type="checkbox"/> Sputum culture	Once For 1 Occurrences, Sputum
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences Specimen Source: Urine Specimen Site:

Laboratory - Additional Microbiology Screens

<input type="checkbox"/> Aerobic culture	Once
<input type="checkbox"/> Anaerobic culture	Once
<input type="checkbox"/> Gastrointestinal pathogens panel, PCR	Once, Stool
<input type="checkbox"/> Respiratory culture, quantitative	Once, Mini bronchial alveolar lavage

<input type="checkbox"/>	Respiratory pathogen panel with COVID-19 RT-PCR	Once
<input type="checkbox"/>	Sputum culture	Once, Sputum
<input type="checkbox"/>	Urine Culture and Urinalysis	"And" Linked Panel
<input type="checkbox"/>	Urine culture	Once For 1 Occurrences, Urine
<input type="checkbox"/>	Urinalysis	STAT For 1 Occurrences

Laboratory - Additional Microbiology Screens

<input type="checkbox"/>	Aerobic culture	Once For 1 Occurrences
<input type="checkbox"/>	Anaerobic culture	Once For 1 Occurrences
<input type="checkbox"/>	Gastrointestinal pathogens panel, PCR	Once For 1 Occurrences, Stool
<input type="checkbox"/>	Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
<input type="checkbox"/>	Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
<input type="checkbox"/>	Sputum culture	Once For 1 Occurrences, Sputum
<input type="checkbox"/>	Urinalysis	Once For 1 Occurrences
<input type="checkbox"/>	Urine culture	Once For 1 Occurrences, Urine

Imaging

Chest X -Ray

<input type="checkbox"/>	Chest 1 Vw Portable	STAT, 1 time imaging, Starting S at 1:00 AM For 1
<input type="checkbox"/>	Chest 2 Vw	STAT, 1 time imaging, Starting S at 1:00 AM For 1

Consults

Antibiotics Pharmacy Consult

<input type="checkbox"/>	Pharmacy consult to manage dose adjustments for renal function	Routine, Until discontinued, Starting S Adjust dose for: Pharmacy consult to review orders for renal dosing prior to administration of second dose of antibiotics
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Consults

<input type="checkbox"/>	Consult to Sepsis Response Team	Does the patient display signs and symptoms suspicious of infection at this time? Yes Reason for Consult? Evaluate patient for sepsis and initiation of Sepsis Acute Care Initial Treatment Protocol
<input type="checkbox"/>	Consult Infectious Diseases	Reason for Consult? Consult with Infectious Disease to review and/or adjust current antibiotic selection if necessary. Initial treatment should already be initiated. Patient/Clinical information communicated? Patient/clinical information communicated?

Consults

<input type="checkbox"/>	Consult Infectious Diseases	Reason for Consult? Consult with Infectious Disease to review and/or adjust current antibiotic selection if necessary. Initial treatment should already be initiated. Patient/Clinical information communicated? Patient/clinical information communicated?
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